

Business Standards Division -

Commissioner Pam Bucy

Board of Medical Examiners

ACUPUNCTURIST RENEWAL APPLICATION--2014

Please submit this page with check/money order for the following fee by October 31, 2014. Do not send cash. Incomplete applications will be returned.

NAME	LIC. #:
ADDRESS	
PHONE:	E-MAIL:
Please answer the following questions:	
	g with the 2013 renewal, licensees shall affirm f 15 hours of continuing education during each and October 31st)
I certify that I am in compliance with the requirements as stated above and purs exempt from the continuing education	uant to Board rule or that I am
2. RENEWAL DISCIPLINARY STATEM	
Have any legal or disciplinary actions be of your professional licenses since eith Montana or since you renewed your lice Montana Code Ann. Sec. 37-1-105 requirinformation. Failure to accurately furnished denial or revocation of your license.	ner your initial licensure in ense, whichever occurred latest? ires that you report this
Signature	 Date